Attorney Docket No. 0033-1073PUS1

BIRCH, STEWART, KOLASCH & BIRCH, LLP

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COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:	SUBSTRATE WITH A SPACER, PANEL, LIQUID CRYSTAL DISPLAY PANEL, METHOD OF MANUFACTURING PANEL							
-	AND METHOD OF MANUFACTURING LIQUID CRYSTAL DISPLAY PANEL							
Fill in Appropriate	above and/or the follo	wing:		e application is identified by the at		r as set forth		
Information -	The specification was filed on							
For Use Without Specification	United States Application Number							
Attached:	the specification was filed on October 8, 2004					and/or		
	International Ap	plication Number PCT/IP20	04/014927		· : a	nd was		
	amended on				(if app	licable)		
	by any amendment ref	erred to above.		f the above-identified specification to patentability as defined in Title	-			
	I do not know an or patented or describ application, that the same the invention has not foreign to the United months for designs) procountry foreign to the I hereby claim for inventor's certificate li	ed in any printed publication me was not in public use or been patented or made the; States of America on an ap- ior to this application, and to United States of America pri oreign priority benefits und sted below and have also ic application on which priority	on in any country being on sale in the United subject of an inventor plication filed by me hat no application for to this application for the 35, United the Title 35, United the country and for the sale and the sa	Id in the United States of America la fore my or our invention thereof of d States of America more than one its certificate issued before the date or my legal representative or assist patent or inventor's certificate on by me or my legal representatives States Code, §119(a)-(d) of any for oreign application for patent or in	or more than one year year prior to this app of this application in gns more than twelve this invention has been or assigns, except as foreign application(s) it wentor's certificate has	prior to this dication, that any country months (six n filed in any ollows. or patent or ving a filing		
Insert Priority	1 1101.1 Of eight Applicat	ion(s)			Priority C	laimed		
Information:	2003-355955(P)			October 16, 2003	\boxtimes			
(if appropriate)	(Number)	(Country)		(Month/Day/Year Filed)	Yes	No		
	2002 (21017/7)	_				_		
	2003-431013(P)			December 25, 2003				
	(Number)	(Country)		(Month/Day/Year Filed)	Yes	No		
	(Number)	(Country)		(Month/Day/Year Filed)	Yes	□ No		
	(Number)	(Country)		(Month/Day/Year Filed)	Yes	□ No		
	I hereby claim the bene	efit under Title 35, United St	ates Code, §119(e) of	any United States provisional appl	ications(s) listed below	7.		
nsert Provisional Application(s): if any)	(Application Number)			(Filing Date)				
	(Application Number)			(Filing Date)				
	All Foreign Applicatio Date of This Application	ns, if any, for any Patent or lon:	nventor's Certificate	Filed More than 12 Months (6 Mon	ths for Designs) Prior	to the Filing		
nsert Requested information: if appropriate)	Country	Applica	ation Number	Date of Filing (Mon	th/Day/Year)			
	the prior United State acknowledge the duty	oplication(s) listed below an s and/or PCT application i to disclose information whi	d, insofar as the subj in the manner provid ch is material to the p	0 of any United States and/or cet matter of each of the claims of ded by the first paragraph of Titled by the first paragraph of Titled by the first paragraph of Titled to the national or PCT internation	this application is not e 35, United States C Code of Federal Regu	disclosed in ode, §112, I lations, §1.56		
nsert Prior U.S. Application(s): if any)	(Application Number)	(Filing	Date)	(Status - patented, p	ending, abandoned)			
Page 1 of 2 Rev. 05/2004)	(Application Number)	(Filing	Date)	(Status - patented, p	ending, abandoned)			

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

CUSTOMER NO. 02292 (BIRCH, STEWART, KOLASCH & BIRCH, LLP)

Telephone: (703) 205-8000 Facsimile: (703) 205-8050

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

Insert Residence

Insert Post Office Address

Inventor, if any: see above

Full Name of Third Inventor, if any: see above

Full Name of Fourth Inventor, if any: see above

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. Full Name of First or Sole Inventor: Insert Name of Inventor – Insert Date This Document is Signed

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*
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GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*
Naru USUKURA	Naru Usukura		March 17, 2006
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GIVEN NAME/FAMILY NAME	IN THE MEDIC CLOSE A STATE OF		1 30 A 19754
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*
Residence (City, State & Country)		CITIZENSH	ID.
nesiance (City, blate a Country)		CITIZENSIII	11
MAILING ADDRESS (Complete Street Add	bross including City State & Country		
With the Fiber Rad (Complete officer Auc	ness including City, State & Country)		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*
<u> </u>	INVENTOR'S SIGNATURE		,
GIVEN NAME/FAMILY NAME Residence (City, State & Country)	INVENTOR'S SIGNATURE	CITIZENSHI	,
Residence (City, State & Country)		CITIZENSHI	,
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Residence (City, State & Country) MAILING ADDRESS (Complete Street Add	lress including City, State & Country)	CITIZENSH	DATE*
Residence (City, State & Country) MAILING ADDRESS (Complete Street Add GIVEN NAME/FAMILY NAME	lress including City, State & Country)		DATE*

Full Name of Fifth